

STATE OF RHODE ISLAND  
DISTRICT COURT  
\_\_\_\_ DIVISION

**SMALL CLAIMS  
NOTICE OF SUIT**

DOCKET NO.
RECEIPT NO.
CONTINUANCES

PLAINTIFF  
NAME AND  
ADDRESS

TO:  
DEFENDANT  
NAME AND  
ADDRESS

ATTORNEY FOR PLAINTIFF (Name, Address and Phone)

ATTORNEY FOR DEFENDANT (Name, Address and Phone)

THE ABOVE PLAINTIFF(S) **CLAIM YOU OWE \$** \_\_\_\_\_ PLUS COSTS OF SUIT \$ \_\_\_\_\_

FOR A TOTAL OF \$ \_\_\_\_\_ THE REASONS ARE:  BOOK ACCOUNT  OTHER - (EXPLAIN BELOW)

PLAINTIFF(S) WAIVE RIGHT OF APPEAL \_\_\_\_\_  
Plaintiff/Plaintiff's Attorney

**PROOF OF CLAIM AND MILITARY SERVICE AFFIDAVIT**

I, \_\_\_\_\_, on oath, depose and say that defendant(s) owe \$ \_\_\_\_\_ as set forth above and are not at the time of the commencement of the above entitled action, nor are now, in the military service of the United States as defined in Article 1 of the "Soldiers and Sailors Civil Relief Act of 1940" as amended, nor an infant or an incompetent and presently reside at the above address.

Subscribed and Sworn to

before me on \_\_\_\_\_

Signature/Title

Notary/Clerk

**ANSWER DATE**

**ADDRESS**

**TRIAL DATE**

Set by Court or plaintiff's attorney

\_\_\_\_ Division District Court

Answer to be Filed with Clerk of Small Claims Court at above address.

AM  PM  
Set by Court or plaintiff's attorney

**JUDGMENT**

- JUDGMENT PLAINTIFF     JUDGMENT DEFENDANT     JUDGMENT COUNTERCLAIM
- DISMISSED     OTHER (SEE REVERSE)
- AFTER DEFAULT     AFTER TRIAL     AGREEMENT FOR PAYMENT

See attached agreement for terms of payment.

ENTER \_\_\_\_\_ J.

DATE \_\_\_\_\_

BY ORDER \_\_\_\_\_  
CLERK

DAMAGES \$ \_\_\_\_\_ ENTRY FEE \$ \_\_\_\_\_

INTEREST \$ \_\_\_\_\_ SERVICES \$ \_\_\_\_\_

ATTY. FEES \$ \_\_\_\_\_ OTHER \$ \_\_\_\_\_

TOTAL AWARD \$ \_\_\_\_\_ TOTAL COSTS \$ \_\_\_\_\_

Docket No.

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**PROCEEDINGS AFTER JUDGMENT**

Execution Issued (Date) \_\_\_\_\_ Returned (Date) \_\_\_\_\_

Alias Issued (Date) \_\_\_\_\_ Returned (Date) \_\_\_\_\_

Pluries Issued (Dates) \_\_\_\_\_ Returned (Date) \_\_\_\_\_

**CITATION IN SUPPLEMENTARY PROCESS -**

Served (Date) \_\_\_\_\_ Returned (Date) \_\_\_\_\_

Continuation Dates \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Body Attachment (Date) \_\_\_\_\_

**HEARING DATE - MOTION TO ATTACH -**

Motion Granted

Motion Denied

Funds Reported by Garnishee \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MOTION DATE TO CHARGE GARNISHEE -**

Motion Granted

Motion Denied

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**OTHER DISPOSITIONS**

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**SPECIAL DOCKET ENTRIES**

Notice to defendant(s) mailed

Notice to plaintiff for alternative service —